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CONFIRMATION NO. 4430

<b>SERIAL NUMBER</b> 10/500,410	<b>FILING OR 371(c) DATE</b> 06/24/2004 <b>RULE</b>	<b>CLASS</b> 434	<b>GROUP ART UNIT</b> 3711	<b>ATTORNEY DOCKET NO.</b> 59376.US/0910.2
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***This application is a 371 of PCT/GB02/05844 12/20/2002 *IC***\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED KINGDOM 0200325.9 01/08/2002

UNITED KINGDOM 0213981.4 06/18/2002 *IC*

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 10	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>IC</i> Examiner's Signature _____ Initials _____				

**ADDRESS**

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**TITLE**

Dummy medical instrument for use in a simulator

<b>FILING FEE RECEIVED</b> 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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